

# Carbon County Senior Citizen

## Pain Relief in Older Adults: Overturning the Barriers

#### What is pain?

- Pain is subjective—it is whatever the individual reports it to be.
- Pain is associated with chronic (osteoarthritis) and acute (surgery) conditions.
- Pain is often undertreated and misunderstood in the individual over 65 years of age.

Today 50% of the older adult populations that report chronic daily pain live in the community while 80% that report the same are found in nursing homes.

It is estimated that by the year 2030 - 20% of the population will be over the age of 65.

What is the standard approach when it comes to the older adult and pain? All older adults will either be pain free, or their pain will be controlled to a level that is acceptable to the patient and allows the elder to maintain the highest level of functioning possible.

Pain is a common experience for many older adults, and is associated with a number of chronic (e.g., osteoarthritis) and acute (e.g., cancer, surgery) conditions.

What are the different definitions/type of pain?

- Pain is defined as "an unpleasant sensory and emotional experience" and also as "whatever the experiencing person say it is, existing whenever he says it does". These definitions highlight the multidimensional and highly subjective nature of pain. Pain is usually characterized according to the duration of pain (e.g., acute versus persistent) and the cause of pain (e.g., nociceptive versus neuropathic).
- <u>Acute pain</u> defines pain that results from injury, surgery, or tissue damage. It is usually associated with autonomic activity/ such as tachycardia and diaphoresis. Acute pain is usually time-limited and subsides with healing.
- <u>Persistent pain</u> defines pain that persists for a prolonged period (usually more than 3 to 6 months). Persistent pain may or may not be associated with a diagnosable disease process and autonomic activity is usually absent. Persistent pain is often associated with functional loss, mood and behavior changes, and may cause one to stop enjoyable activities.

- <u>Nociceptive pain</u> refers to pain caused by stimulation of specific peripheral or visceral
  pain receptors. This type of pain results from disease processes (e.g., osteoarthritis),
  soft tissue injuries (e.g., falls), and medical treatment (e.g., surgery, vein puncture, and
  other procedures). It is usually localized and responsive to treatment.
- <u>Neuropathic pain</u> refers to pain caused by damage to the peripheral or central nervous system. This type of pain is associated with diabetic neuropathies, post-herpetic (shingles) and trigeminal neuralgias (pain of the face/jaw), stroke, and chemotherapy treatment for cancer. It is usually more diffuse and less responsive to analgesic (pain) medications.

#### Why are older adults more susceptible to poor pain management?

- Myths that it is a natural process of aging this acceptance only aids in diminishing your
  quality of life because you accept it as a fact and live with it therefore not seeking treatment.
- Fear of addiction—if you are truly in pain and you take the medication as prescribed addiction is not likely.
- Poor reporting of pain.
- Fear of being thought of as a problem patient to the physician.
- Misconceptions among healthcare professionals that the older adult does not experience pain as acutely as the younger adult or can reliably report their pain.
- Ethnicity, financial status, 2+co morbidities, dementia, etc.

In one review of medication use among the older adult 1 in 5 individuals experiencing pain used pain medication within a 1 week period. Why? 1) under treatment by prescribers, 2) financial difficulties/cost of medications & 3) reluctance to take the medications.

# What are some of the major implications and damaging results on the older adult if pain is not reported accurately or managed?

- Depression
- Sleep disturbances
- Withdrawal and decreased socialization
- Functional loss and increased dependency
- Increase in mental impairment (decrease memory, increase confusion & forgetfulness)
- Increased health care utilization and costs

#### So what can be done to aid in appropriate pain management for you?

#### Prevention of pain can be done by:

- Assessing your pain regularly and frequently. Report increases in pain or a decrease
  in relief using your present regimen to (PCP) Primary Care Physician to facilitate to appropriate treatment. Report 1) the area of pain, 2) the activity at the time you first noticed
  an increase, 3) use a pain scale to help you describe how the pain feels, 4) the length of
  time you have had increased pain, 5) what you have tried to relieve the pain (meds taken, other methods, heat/cold packs, relaxation therapy, etc.)
- Anticipate pain before, during, and after painful diagnostic and/or therapeutic
  treatments. Confer with your PCP in regards to dosage amounts before and after treatment. Some PCP's may want you to increase or decrease a specific medication dose prior to a treatment, as well as after the procedure. Make sure you have any specific instructions written down and make sure you can read them before you leave the office.
- Request from your PCP or the pharmacist a write up about any new medications that you are given but especially pain medications and their side effects; adverse effects; interactions with other drugs; and issues of addiction, dependence, and tolerance.
- Take medications for pain on a regular basis and to avoid allowing pain to escalate. This is the SECRET to successful pain management. One of the misconceptions of the older adult population is that they can take the pain. "I've suffered through worse". Yes you have but YOU WERE YOUNGER then and healed somewhat faster. It only stands to reason that if you take the medication you are prescribed on the schedule you are given-you will not only maintain a tolerable pain level but you will not be subjected to the depression, anxiety, decrease in socialization, etc.

#### **Pharmacological Treatments:**

Older adults are at increased risk for adverse drug reactions.

Monitor medications closely to avoid over-or under-medication.

Takes prescribed pain medication on a regular basis to maintain therapeutic levels. Avoid use of over the counter (OTC) pain relievers unless otherwise prescribed by your physician.

#### Non-pharmacologic:

These techniques should be tailored to the individual. Speak to you PCP before you try anything such as an exercise class.

Cognitive-behavioral strategies focus on changing the person's perception of pain (e.g. relaxation therapy, as relaxation, massage, and heat/cold, education, and distraction) and may not be appropriate for cognitively impaired persons.

# New AARP Driver Safety Course

Insurance discounts

New Material Provided

Call Price Senior Center

to sign up 636-3202

Leonard Miller, Instructor

# Monday April 12, 2010

1:00pm –5:00pm

Cost per person \$12.00

Lunch is available at the center at Noon

Call center to make reservations for lunch

60 AND ABOVE \$3.00 DONATION

UNDER 60 \$6.25

# **Modern Cataract Surgery**

Timothy L. Byers, M.D., Ph.D. Jeffrey Hansen, M.D.

Cataract surgery is one of the most successful surgeries in modern medicine. In the space of a very few years, the procedure has advanced so that it is much safer and easier than it was in former times.

Cataract surgery is now done as an out-patient procedure so that a person will go into the surgery center for the operation itself, but will go home after the surgery is over. You can usually expect to spend about 2 hours total at the surgery center for your cataract surgery. It is no longer necessary to put people to sleep for the operation. Often we do not need to use an injection or needles around the eye.

With our small incision surgery, recovery is generally quick and there is very little in terms of limitations of activities after the surgery.

The difference in cataract surgery has been the development of high energy ultrasound probes which are able to remove the cataract through a very, very small incision. This has made the procedure safer and more comfortable and allowed for much quicker recovery.

Although all surgeries have risks, problems with cataract surgery are not common and patients generally have very little discomfort and quick recovery.

If your vision has decreased or if you are having a lot of glare problems in bright lights, you may benefit from a modern cataract surgery.

Please call us so that we can look at your eyes and see if cataract surgery is something that might help you.

Dr. Byers and Dr. Hansen are medical doctors specializing in diseases and surgery of the eyes. If you have any questions that you would like addressed in future issues or questions about your own eye health, please call 637-8689 or 1-800-473-6994.

Physical pain relief strategies focus on promoting comfort and altering physiologic response to pain (e.g., heat, cold, TENS units, **T**ranscutaneous **E**lectrical **N**erve **S**timulation ) and are generally safe and effective.

Combination approaches that include both pharmacological and pain treatments that do not require medications are often the most effective.

#### So what can YOU do as the older adult with pain?

- Learn how to rate your pain so that you and your primary care physician can discuss those treatment options that will best suit your situation. Do not be afraid to report an
- increase in pain to your PCP. It may be temporary; due to an increase need in a dosage or that you need a totally different medication all together.
- Try to keep a record of items, dates and activities when you notice that your pain in creases. Show it also to your PCP. There may be other options that will better serve the purposes of reducing your pain.
- Report to your PCP if a new medication causes adverse side affects such as; rash, hives, tightness in the throat, difficulty breathing, etc.. Expect to see some side effects, especially with opioid use such as; sedation, nausea, confusion and delirium.
- Keep an accurate list of ALL YOUR MEDICATIONS-Update the list every month. Take it
  with you to your appointments with your physician. This will aid in keeping your pain
  management regimen consistent, prevent potentially dangerous drug interactions and
  adverse effects, poly-pharmacology (too many different medications prescribed for the
  same diagnosis) and if you are seeing more than one physician it will keep then informed of present treatments.
- Keep as active as you possibly can. No one expects marathon runners in your population but you can do whatever you feel comfortable with and as long as your PCP agree.
   Ex: joints of the knees are especially an area of pain in the older adult and some find a benefit from walking in conjunction with a pain reliever. Other options (mild in-chair exercises, water aerobics, stretch bands, etc.). You may even want to try a relaxation class, acupuncture, yoga or a meditation/imagery class-any of these combined with medication have proven to increase success of pain relief.
- Last-if you have any questions about your present pain medication or regimen. Call your PCP and make an appointment. Take your med list with you and discuss where you are right now with pain relief. Make sure you get all your questions answered and that you fully understand the plan that your physician discusses with you. REMEMBER-PAIN IS NOT A PART OF AGING YOU HAVE TO ACCEPT.

GROUPS	Bingo (American Legion Auxiliary) at 6p			Quilters 2nd Thurs at 6p / Quilters 3rd Thurs at 1p / Carbon County Historical Society last Thurs of month	
MUSIC	Some Mondays "Music of the Heart"	The Four Tune O's 1st & 3rd Tues 11:30a /	Melody Five at 11:30a	James (Jimmy)Eaquinto 1st & 3rd Thurs / Sing Along 2nd & 4th Thurs 11:30a	
EXERCISE	Exercise Gym open daily 8a-4p	Exercise Gym open daily 8a-4p Yoga at 10:00a Pilates at 11:00a	Exercise Gym open daily 8a-4p	Exercise Gym open daily 8a-4p Yoga at 10:00a Pilates at 11:00a	Exercise Gym open daily 8a-4p
CLASSES	Computer Lab Open Daily 8a-4p Line dancing 9:00a Ceramics 10:00a	Computer Lab Open Daily 8a-4p Line dancing 9:00a Ceramics 10:00a	Computer Lab Open Dai- ly 8a-4p Ceramics 10:00a Oil Painting 1:00p	Computer Lab Open Daily 8a-4p Line dancing 9:00a Ceramics 10:00a Organ Lessons 11:00a & 1:00p	Computer Lab Open Dai- ly 8a-4p
ACTIVITIES	Billiards daily 8a-4p Shopping Fresh Mar- ket1p Shopping 2nd Mon Wal-mart 1p	Billiards daily 8a-4p Golf (seasonal) Cards/Game 1p Movie 1p	Billiards daily 8a-4p Bingo 1p	Billiards daily 8a-4p Cards/Game 1p Shopping Smiths 1p	Billiards daily 8a-4p Bowling at Country Lanes 1p
CLINICS	Blood Pressure 2nd & 4th Monday at 10:00a /			On going Daily Activities: Subject to Change with out Notice Computer Class: Call Center for info 636-3202	Free Hearing & Hear- ing Aid Checks 2nd Fri. at 12:45pm
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East Carbon				
East Carbon				
Classes & Activities	Day & Time			
The Four Tune O's	1st & 3rd Monday 11:30am			
Lunch	Daily ( Mon –Fri) 12:30pm			
Bingo	Wed, 1:30pm			
Blood Pressure	1st & 3rd Weds of month 10:30am			
Shopping in Price	Friday 1:30pm			
Billiards	Daily During Business Hours			
Exercise Class	Tues & Thurs 11:30 a.m.			
Walking (when weather per-				
mits)	Daily 7 a.m.			

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## **High Scores**

**Evelyn Pretiger 160** 

May Marchello 160

Katie Eaquinto 132

John Polito 155

Elnora Clark 177

Bill Minnick 201

Henry Smith 176

Dora Smith 140

Earline Jenkins 163

Jake Leyba 143

Tonie Leyba 172

Paul Hill 142

Pat Hill 172

Don King 189

Mary Lou Steele 161

Tom Bowers 196

Nora Aragon 110

Doug Hintze 212

Pat Modes 153

Juan Medina 174

Helen Zavala 147

Del VanWagoner 204

Rusty VaWagoner 100

Rose Craven 173

Tony Riffle 150

# Senior Bowling Country Lanes Feb. 2010

## **High Series**

Mary Lou Steele 154+141+148=443

Elnora Clark 148+177+142=467

Del VanWagoner 208+199+158=565

Doug Hintze 147+212+187=546

Toni Leyba 172+133+162=467

**Splits** 

Tony Riffle 4-5

Mary Lou Steele 5-6

Earline Jenkins 5-6

Evelyn Pretiger 4-5

Rose Craven 4-5 & 3-10

Don King 4-5

Tom Bowers 4-6 & 2-10

Katie Eagunito 5-6 & 3-7-10 & 5-7-9

Juan Medina 5-6 & 4-5

Elnora Clark 5-6 &4-5

May Marchello 5-6

Henry Smith 4-5

Del VanWagoner 4-5 & 5-10

Doug Hintze 4-5 & 5-6

Strike Pot

Nora Aragon

Tom Bowers

Rose Craven

Elnora Clark

Bill Minnick

Carolyn Oman



# **Yard Sale**

May 15, 2010

8:00a.m. to 2:00 p.m.

Carbon County Senior Center

30 East 200 South, Price

If you have anything to

donate to the center please bring it in.

Call for more info 636-3202

Homemade Crafts ~ Baked Goods

Yard Sale Items ~

Chili & Bread Stix \$3.00 ~

All Proceeds go to services & activities at the center

### EMBROIDERY DISH TOWELS FOR THE SENIOR CENTER

(WE HAVE THE TOWELS & PATTERNS TO IRON ON THE TOWELS)

HELP RAISE MONEY FOR

SPECIAL PROJECTS

CALL THE CENTER FOR MORE INFORMATION 636-3202

Dear Seniors, April 2010

There are a lot of things happening in the next few months. It should keep us all busy. First, on April 5th we will begin our "Walk to Panama City." Rebecca Mason from RSVP is helping us out by supplying pedometers for those that need one. The Senior Center will be providing, for those who would like, a lanyard with an alligator clip (to help keep those pedometer from falling off and getting lost) and forms to keep track of your steps. Lost pedometers seemed to be a problem for many of our participants last year. Hopefully the lanyard will eliminate the problem!

We have computers class starting again in April. Greg Spence will teach a beginner class on Wednesdays beginning April 7th from 10 a.m. to noon. He will also be teaching an intermediate class on Thursdays starting April 8th from 11 a.m. to noon. Be sure to call the center and sign up as soon as possible.

Next, on Monday April 12th we have scheduled another AARP Defensive Driving class. Leonard Miller has been conducting these classes for the past three years. He advised me to remind those who took the class when he first began teaching that they need to take the class again in order to continue to get a discount from insurance carriers. Leonard donates his time to teach these classes but there is a fee of \$12.00 for materials. Please call the center to signup for the class.

I would also like to remind you about the upcoming yard sale. We've scheduled the yard sale for Saturday May 15th. We are counting on your generous donations to make the yard sale a success. I always look forward to the sale, it gives me the needed motivation to clean out my closets and drawers, the garage and wherever else I tuck "stuff" I don't know what to do with. As with years past in addition to the "stuff," we will have a table with goodies, new crafted items and chili with a bread stick for sale.

Another BIG event coming this summer will be our move to the new Carbon County Senior Activities Center. If you haven't been out for a ride-by of the new building, you should. It is beautiful and it isn't even finished. And, the interior will be even more breathtaking. I know many of you have been waiting years for a new building. Well, it will be a dream come true in short order.

God bless each of you,

Debby

#### Thoughts to consider:

We cannot explain why these little signs mean so much to us. But the fact is that a word of thanks for some small thing can transform our day. —Jeanne Reidy

Love people. Use things. Not vice-versa. —Kelly Ann Rothaus

## **ATTENTION**

#### MOBILE MEAL PARTICIPANTS

- GUIDELINES **REQUIRE** THE MOBILE MEAL DRIVER EITHER SEE OR TALK TO YOU IN ORDER TO LEAVE A MEAL FOR YOU.
- NOTIFY THE SENIOR CENTER NO LATER THAN 9:30 A.M. IF YOU HAVE AN APPOINTMENT AND WILL NOT BE HOME. PLEASE DO NOT PLAY THE "BEAT THE DRIVER" HOME GAME.
- YOU MAY REQUEST A FROZEN MEAL FOR DAYS WHEN YOU NEED TO BE AWAY FROM HOME FOR APPOINTMENTS BY CALLING THE CENTER OR BY REQUESTING ONE FROM YOUR DRIVER A LEAST TWO DAYS IN AD-VANCE.
- YOU ARE NOT THE ONLY ONE ON THE MOBILE MEAL ROUTE. PLEASE
  BE COURTEOUS TO YOUR DELIVERY PERSON BY FOLLOWING THESE SIMPLE RULES. IT SAVES OUR DRIVERS TIME AND SPEEDS UP THE MEAL DELIVERIES TO OTHERS IF UNNECESSARY STOPS ARE ELIMINATED.

# ATTENTION SENIORS

Are you looking for a volunteer opportunity? Castleview Hospital Volunteer Auxiliary (formerly known as the Pink Ladies) is looking for volunteers. Applications may be picked up at the hospital gift shop.